

Certification of Mailing  
I hereby certify that I have reasonable basis to expect that, on the date shown below, this correspondence is being mailed or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Name	S. Robert Chuey	39,140
Registration No (if applicable)		
Signature	<i>[Signature]</i>	
Date	2-1-05	

AG/1614 7/2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 09/489,310  
Applicant(s) : Gary Stephenson  
Filed : January 21, 2000  
Title : METHODS OF USING A BEVERAGE  
COMPOSITION  
TC/A.U. : 1614  
Examiner : Frederick F. Krass  
Conf. No. : 5677  
Docket No. : 7922  
Customer No. : 27752

NOTICE OF APPEAL FROM THE EXAMINER TO  
THE BOARD OF PATENT APPEALS AND INTERFERENCES

Commissioner for Patents

P. O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is \$500.00 (37 CFR 41.20(b)(1)).

The Director is hereby authorized to charge the above fees, or any additional fees that may be required, or credit any overpayment to Deposit Account No. 16-2480 in the name of The Procter & Gamble Company. An additional copy of this Notice is enclosed for that purpose.

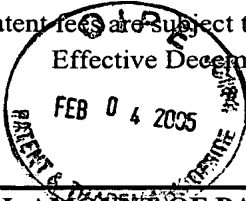
I am an attorney or agent of record.

Respectfully submitted,


THE PROCTER & GAMBLE COMPANY

*[Signature]*  
S. Robert Chuey  
Registration No. 39,140  
(513) 634-0102

February 1, 2005

<b>FEE TRANSMITTAL</b> <b>for FY 2005</b> Patent fees are subject to annual revision. Effective December 8, 2004 	<b>Complete if Known</b>	
	Application Number	09/489,310
	Confirmation Number	5677
	Filing Date	January 21, 2000
	First Named Inventor	Gary Stephenson
	Examiner Name	Frederick F. Krass
	Art Unit	1614
<b>TOTAL AMOUNT OF PAYMENT (\$)</b> 500.00		
Attorney Docket No. 7922		

<b>METHOD OF PAYMENT</b> 1. [X] The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company	<b>FEE CALCULATION (continued)</b> 5. <b>ADDITIONAL FEES</b> <table border="1"><thead><tr><th>Fee Description</th><th></th><th>Fee Paid</th></tr></thead><tbody><tr><td>Extension for reply within 1<sup>st</sup> month</td><td>(\$120)</td><td><input type="checkbox"/></td></tr><tr><td>Extension for reply within 2<sup>nd</sup> month</td><td>(\$450)</td><td><input type="checkbox"/></td></tr><tr><td>Extension for reply within 3<sup>rd</sup> month</td><td>(\$1,020)</td><td><input type="checkbox"/></td></tr><tr><td>Extension for reply within 4<sup>th</sup> month</td><td>(\$1,590)</td><td><input type="checkbox"/></td></tr><tr><td>Extension for reply within 5<sup>th</sup> month</td><td>(\$2,160)</td><td><input type="checkbox"/></td></tr><tr><td>Information Disclosure Statement fee</td><td>(\$180)</td><td><input type="checkbox"/></td></tr><tr><td>37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)</td><td>(\$130)</td><td><input type="checkbox"/></td></tr><tr><td>37 CFR 1.17 (q) Missing Parts (provisional)</td><td>(\$50)</td><td><input type="checkbox"/></td></tr><tr><td>Non-English specification</td><td>(\$130)</td><td><input type="checkbox"/></td></tr><tr><td>Notice of Appeal</td><td>(\$500)</td><td>[X]</td></tr><tr><td>Filing a brief in support of an appeal</td><td>(\$500)</td><td><input type="checkbox"/></td></tr><tr><td>Request for oral hearing</td><td>(\$1,000)</td><td><input type="checkbox"/></td></tr><tr><td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td><td>(\$1,370)</td><td><input type="checkbox"/></td></tr><tr><td>Other:</td><td></td><td><input type="checkbox"/></td></tr></tbody></table>	Fee Description		Fee Paid	Extension for reply within 1 <sup>st</sup> month	(\$120)	<input type="checkbox"/>	Extension for reply within 2 <sup>nd</sup> month	(\$450)	<input type="checkbox"/>	Extension for reply within 3 <sup>rd</sup> month	(\$1,020)	<input type="checkbox"/>	Extension for reply within 4 <sup>th</sup> month	(\$1,590)	<input type="checkbox"/>	Extension for reply within 5 <sup>th</sup> month	(\$2,160)	<input type="checkbox"/>	Information Disclosure Statement fee	(\$180)	<input type="checkbox"/>	37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)	(\$130)	<input type="checkbox"/>	37 CFR 1.17 (q) Missing Parts (provisional)	(\$50)	<input type="checkbox"/>	Non-English specification	(\$130)	<input type="checkbox"/>	Notice of Appeal	(\$500)	[X]	Filing a brief in support of an appeal	(\$500)	<input type="checkbox"/>	Request for oral hearing	(\$1,000)	<input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370)	<input type="checkbox"/>	Other:		<input type="checkbox"/>
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<b>FEE CALCULATION</b> 2. <b>BASIC FILING FEE – Large Entity</b> <table border="1"><thead><tr><th></th><th>FILING FEE</th><th>SEARCH FEE</th><th>EXAMINATION FEE</th><th></th></tr></thead><tbody><tr><td>Application Type</td><td></td><td></td><td></td><td>Fee Paid</td></tr><tr><td>Utility</td><td>(\$300)</td><td>(\$500)</td><td>(\$200)</td><td>(Total = \$1000) <input type="checkbox"/></td></tr><tr><td>Design</td><td>(\$200)</td><td>(\$100)</td><td>(\$130)</td><td>(Total = \$430) <input type="checkbox"/></td></tr><tr><td>Reissue</td><td>(\$300)</td><td>(\$500)</td><td>(\$600)</td><td>(Total = \$1400) <input type="checkbox"/></td></tr><tr><td>Provisional filing fee</td><td></td><td></td><td></td><td>(Total = \$200) <input type="checkbox"/></td></tr></tbody></table>		FILING FEE	SEARCH FEE	EXAMINATION FEE		Application Type				Fee Paid	Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>	Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>	Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>	Provisional filing fee				(Total = \$200) <input type="checkbox"/>																
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3. <b>APPLICATION SIZE FEE:</b> Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) SUBTOTAL (2)+(3) (\$)[0]																																														
4. <b>EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</b> <table border="1"><thead><tr><th></th><th>Extra Claims</th><th>Fee from Below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x</td><td><input type="checkbox"/></td><td>=</td><td><input type="checkbox"/></td></tr><tr><td>Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x</td><td><input type="checkbox"/></td><td>=</td><td><input type="checkbox"/></td></tr><tr><td>Multiple Dependent claims:</td><td><input type="checkbox"/></td><td>=</td><td><input type="checkbox"/></td></tr></tbody></table> <p>** or number previously paid, if greater; For Reissues, see below</p> <p><b>Fee Description</b></p> <p>Claims in excess of 20 (\$50 per claim)</p> <p>Independent claims in excess of 3 (\$200 per claim)</p> <p>Multiple dependent claim, if not paid (\$360)</p> <p>**Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim)</p> <p>**Reissue claims: each claim over 20 and more than original patent (\$50 per claim)</p> <p>SUBTOTAL (4) (\$)[0]</p>		Extra Claims	Fee from Below	Fee Paid	Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/>	=	<input type="checkbox"/>	Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/>	=	<input type="checkbox"/>	Multiple Dependent claims:	<input type="checkbox"/>	=	<input type="checkbox"/>																														
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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	S. Robert Chuey	Registration No.	39,140
Signature		(Attorney/Agent)	
		Telephone	(513) 634-0102
		Date	2-1-05

This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 422 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.